TRADE CREDIT INSURANCE Application



13 IIIICU III DY DIA ICPI	esentative!			
Received on:		Reference number of indemnity clain	n:	
Place where received:		_		
Name, surname of the receiver	:	_		
Signature:		-		
Applicant:				
Name, Surname: John Doe		Persor	nal No: 18056422222	
Position: Director		Postal code: D-10117		
Phone, fax: +49 12346 789		e-mail: john.doe@gmail.com		
Policy serries: 17 - 65 No: 11484		I agree, to receive related information from BTA by email: No Yes X		
Applicants represented co	ompany's data:		\wedge	
	I. Johnscopmany	Reg.	Reg. No: 4000000000	
Address: Berlin, Helwilstrasse 15/49G, Germany		Postal code: D-123 45		
Phone, fax: +49 9876		e-mail: nfo@thecompany.de		
General information:	5-52	e-mail. molecule company.de		
Series of the policy: 10 - 34	Policy number: 1234			
Policy holder's deductible is: 1				
Are other insurance contracts	in force in relation and in	(state the insurance company)		
force to this accident?	No X Yes			
Information on debt a	nd debt defaulting purchaser: (for ea	ch huver submit a senarate applica	tion):	
The buyer who do not me Name, Surname/Name of the c	eet debt obligations:		nal No/Reg.No: 40004567890	
The buyer who do not me Name, Surname/Name of the c	eet debt obligations:		nal No/Reg.No: 40004567890	
The buyer who do not me Name, Surname/Name of the c	eet debt obligations: ompany: Ltd. The Company zaw, Brtniku 83	Persor	nal No/Reg.No: 40004567890	
The buyer who do not me Name, Surname/Name of the c Address: Poland, Warsz Phone, fax: +00125446 BTA coverage with credit	eet debt obligations: ompany: Ltd. The Company zaw, Brtniku 83	Persor Postal e-mail: info@thebadcompany.pl 1 , that the buyer provides credit	nal No/Reg.No: 40004567890 code: PL321654	
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Name, Surname:	John Doe
Signature:	

Date: 11.10.2010

General information about potential insurance event:	
(Developments in the description in detail, in chronological order, showing wha facts. (If necessary, attach a separate sheet.)	t happened, to recover the debt waiting period, activities and other important
On 26.04.2010 claim was sent for the unpaid bills.	
On 10.05.2010 repeated claim was sent for unpaid bills.	
On 12.05.2010 received partial bill Nr. AF002676 payment	
On 07.06.2010 pretension sent for unpaid bills.	
No answer received.	
Also pretensions were sent on 28.06.2010, 20.07.2010, 13.08.2010.	
	<u> </u>
Insurance indemnity transfer to account:	
X Insured Authorized person (Authorization must be presented)	Other person
Receiver of an indemnity:	,
Name, Surname: Ltd. Johnscopmany	
	Personal No/Reg. No: 41234567890
Address: Wilhelmstrasse 49/15 G Berlin, Germany	Personal No/Reg. No: 41234567890 Postal code: D-10117
Name of the bank: AS CITADELE	Postal code: D-10117
	Postal code: D-10117
Name of the bank: AS CITADELE Account number: L / V / X / X / U / N / L / A / X / X / X / X / X / X /	Postal code: D-10117 X /X /X /X /X /X / Currency: LVL X A copy of the insurance policy
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Name of the bank: AS CITADELE Account number: L / V / X / X / U / N / L / A / X / X / X / X / X / X / X / X / X	Postal code: D-10117 X /X /X /X /X /X / Currency: LVL A copy of the insurance policy The documents, which show the buyer's outstanding commitments (founding Documents must be submitted to the full version, together with all attachments, amendments, acceptance - transfer laws, bills, invoices, etc.) Other d live conversation recordings, will file other information with regards to insurance use these recordings as a proof in court proceedings in insurance claim litigation. that in case of providing untrue and misleading information, BTA has the right to oriminal responsibility in accordance with Paragraph 177 (fraud) and Paragraph 178 at because of the mentioned reasons I do promise to cover all the losses.
Name of the bank: AS CITADELE Account number: L / V / X / X / U / N / L / A / X / X / X / X / X / X / X / X / X	Postal code: D-10117 X /X /X /X /X /X / Currency: LVL A copy of the insurance policy The documents, which show the buyer's outstanding commitments (founding Documents must be submitted to the full version, together with all attachments, amendments, acceptance - transfer laws, bills, invoices, etc.) Other
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